

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant :	Derek Shaw et al.	Art Unit :	3763
Serial No. :	09/936,859	Examiner :	Kevin C. Simons
Filed :	November 15, 2001	Confirmation No.:	4449
		Notice of Allowance Date:	December 30, 2003
Title :	AUTOMATICALLY OPERABLE SAFETY SHIELD SYSTEM FOR SYRINGES		

## MAIL STOP ISSUE FREE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed May 31, 2006, enclosed is a completed issue fee transmittal form PTOL-85b.

The required fees for the issue fee and publication fee, including patent copies, were previously paid on March 30, 2004. Please apply the \$70 difference since 2004, and any additional charges or credits to our Deposit Account No. 06-1050, referencing Attorney Docket No. 06275-283US1.

Respectfully submitted,

Date: August 31, 2006

/Celia H. Leber/  
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# **PART B - FEE(S) TRANSMITTAL**

Complete and send this form, together with applicable fee(s), to: **Mail**

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26164 7590 05/31/2006

**JAMES R. POWERS Ph.D. J.D.**

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_____ (Date)
_____ (Signature)
_____ (Name)

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/536,859	1/17/2001	Debra M. Shaw	06/78,383/01	8449

**TITLE OF INVENTION: AUTOMATICALLY OPERABLE SAFETY SHIELD SYSTEM FOR SYRINGES**

APPR. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE OF PAYMENT
nonprovisional	NO	\$70		\$70	06/14/2006

INVENTOR	CLASS	CLASS-SUBCLASS
SHAW, DEBRA M.	3760	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.33):

1. Change of correspondence address (or change of Correspondence Address form PTO/SB/122) with previously filed docket number:

1. "Fee Address" indication (or "Fee Address" indication form PTO/SB/122, July 23, 2002) is main (or) auxiliary: Use of a Customer's Number is required:

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR alternatively, (2) the name of a single firm (being as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no notice will be printed.

1. **Fish & Richardson P.C.**

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless so assigned, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. (Completion of this form is NOT a substitute for filing an assignment.)

(A) NAME OF ASSIGNEE:

(B) PRESIDENT, CITY and STATE OR COUNTRY

**AstraZeneca AB**

**Södertälje, Sweden**

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee  
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5. Change in Entity Status (from status indicated above)

☐ Applicant claims SMALL ENTITY status. See 37 CFR 1.37.

☐ Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.37(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid sums for to the application identified above (NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered agent or, by the assignee, or other party in interest as shown by the records of the United States Patent and Trademark Office).

(Authorized Signatory) **Celia H. Elze**

(Date)

**August 21, 2006**

Typed or Printed Name **Celia H. Elze**

Registration No. **33,534**

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